

Application No. 09/815,646  
Art Unit 3626

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**NOV 10 2008**

**Amendments to the Specification**

**Please amend the first paragraph on page 9, lines 1-5 in the following manner.**

Although according to the embodiment described herein, HTTP communication between personal computer 212 ~~442~~ and Web server 240a ~~440~~ is conducted over a TCP/IP connection, other communication protocols are possible and this example is not intended to limit the claims appended hereto. For example, a UDP ("User Datagram Protocol") implementation is possible.

**Please amend the second paragraph on page 9, lines 6-13 in the following manner.**

It is to be understood that in general clients 205 may connect to Internet 214 ~~444~~ using any potential medium whether it be a dedicated connection such as a cable modem, T1 line, DSL ("Digital Subscriber Line") or a dial-up POTS connection. For example, in addition to client 205c, FIG. 2a also shows clients 205a and 205b. Client 205b is coupled to Internet 214 via cable modem 268 and ISP 220. Client 205a, on the other hand, is a corporate client that is coupled to Internet 214 via T1 line 230b and router 235b. In this case, various node terminals (not shown) at client 205a share the bandwidth on T1 line 230b, wherein the bandwidth is distributed via Ethernet 274.

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**Please amend the fourth paragraph on page 9, lines 16-28 in the following manner.**

Medical analysis site 219 includes front-end subsystem 218 ~~219~~, core engine 221 and patient record database 231. Front-end subsystem 218 ~~219~~ provides a graphical user interface ("GUI") for clients connecting to medical analysis site 219. In particular, front-end subsystem 218 ~~219~~ includes a web server 240a and HTML ("Hypertext Markup Language") database 250a to clients 205 connecting with medical analysis site 219. Core engine 221 performs various backend processing functions at medical analysis site 219 related to the analysis of medical data as described in more detail below. Web server 240a is coupled to core engine server 240b at core engine 221 ~~220~~, which is coupled to core engine relational database 250b. Patient record database 231 stores medical claim data relating to various patients in a normalized format as described in more detail below. Web server 240a is also coupled to medical data server 240c, which is coupled to medical data relational database 250.

**Please amend the third paragraph on page 10, lines 26-32 in the following manner.**

FIG. 4c depicts a data structure for storing a chronological rule record according to one embodiment of the present invention. Each chronological rule record 409 includes act weight field 432 and scene weight field 434 ~~414~~. Act weight field 432 stores a floating point value between 0-1 that represents the degree of confidence a particular event constitutes a change in temporal segment (e.g., an act). Scene weight field 434 stores a floating-point value between 0-1 that represents the degree of confidence that a particular event constitutes a change in a scene temporal segment.

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**Please amend the third paragraph on page 11, lines 22-26 in the following manner.**

FIG. 5b depicts a data structure for representing an exemplary patient record according to one embodiment of the present invention. Each patient record 505 includes patient ID field 521, last name field 523, first name field 525, middle name field 527 ~~572~~, date of birth field 529, street address field 531, city field 533, state field 535 and telephone field 537.

**Please amend the last paragraph on page 13, lines 32-34 and continued to page 14 lines 1-14 in the following manner.**

The process is initiated in step 629. In step ~~632a~~ 632, a new claim record 507 is instantiated. In step 637, a next phrase is retrieved. According to one embodiment, the next phrase is retrieved via an OCR process from a medical document. In the alternative, if the input is provided manually, the next phrase is received from a human operator interacting with medical analysis site 219. In step 639, phrase database 114 is searched to locate a matching phrase. In step 641, it is determined whether the phrase is located in phrase database 114. If not ('no' branch of step 641), the next phrase is considered in step 637. If the phrase is located in phrase database ('yes' branch of step 641), in step 643, a new medical element record 513 is instantiated. In particular, a unique element ID is generated, which is used to populate element ID field 563. The essential element ID corresponding to the matched phrase is stored in essential element ID field 567 and the current claim ID is stored in Claim ID field 569. The date pertaining to the element is stored in a date field 573. In step 645, it is determined whether all phrases have been analyzed. If not ('no' branch of step ~~645~~ 645), flow continues with step 637 and the next phrase is analyzed. If all phrases have been analyzed ('yes' branch of step 645), in step 651 a sequencing process is initiated.

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**Please amend the first paragraph on page 17, lines 24-30 in the following manner.**

FIG. 8a shows a sample report according to one embodiment of the present invention. FIG. 8 shows patient conclusion analysis result 805 compared with best-case conclusion analysis 803 for a single clinical conclusion with respect to a temporal segment. The area of patient conclusion analysis result ~~840=M(p) 860 820=M(b) 830~~ multiplied by ~~I(p) 845 I(b) 815~~. Similarly, the area of best-case conclusion analysis result ~~820=M(b) 830 840=M(p) 860~~ multiplied by ~~I(b) 815 I(p) 845~~.  $\Delta$  represents the ratio between the areas of the actual patient data and the best-case scenario =  $A(p)/A(b)$ .